



New York State Department of Financial Services
One State Street Plaza, New York, NY 10004

Proof of Filing Statement

To Whom It May Concern:

Section 1306 of the Real Property Actions and Proceedings Law (RPAPL) requires lenders, assignees or mortgage loan servicers servicing loans on 1-to-4 family residential properties in New York State to file certain information with the Superintendent of the Department Financial Services within three days after the mailing of a 90-Day Pre-Foreclosure Notice.

The information below pertains to a filing submitted to the Department of Financial Services as required in Section 1306 of RPAPL. The information is presented as filed by the lender, assignee or mortgage loan servicer.

Filer Information:

Name : FCI Lender Services, Inc.
Address : 8180 East Kaiser Blvd
Anaheim Hills CA 92808

Filing Information:

Tracking Number : NYS3937836
Mailing Date Step 1 : 08-JAN-16 12:00:00.000 AM
Mailing Date Step 2 :
Judgment Date Step 3 :
Filing Date Step 1 : 11-JAN-16 02:03:38.000 PM
Filing Date Step 1 Orig : 11-JAN-16 02:03:38.000 PM
Filing Date Step 2 :
Filing Date Step 3 :
Owner Occupd at Jdgmnt :
Property Type : 1 to 4 Family Home
Property Address : 221-02 114th Avenue Cambria Heights
NY 11411
County : Queens
Date of Original Loan : 21-MAY-07 12:00:00.000 AM
Amt of Original Loan : 76450
Loan Number Step 1 :
Loan Number Step 2 :
Loan Reset Frequency :
Loan Type : Junior Lien
Loan Details : Fixed Rate
Loan Term : 20 Year
Loan Modification : No Modification
Days Delinquent : Other
Borrower's Name : Marc Jean Bijoux
Address : 221-02 114th Avenue
Cambria Heights 11411
Borrower's Phone No : 9175319409
Filing Status : Step 1 Completed

Sincerely,

New York State Department of Financial Services



FCI Lender Services, Inc.

Loan Servicing • Specialty Servicing • Default

(714) 282-2424 (800) 931-2424 Fax: (714) 282-5775

Marc Jean Bijoux
221-02 114th Avenue
Jamaica Queen, NY 11411

January 8, 2016

RE: Loan Number: [REDACTED]
Subject Property: 221-02 114th Avenue, Cambria Heights, NY 11411

Dear Mr. Marc Jean. Bijoux:

**“YOU COULD LOSE YOUR HOME. PLEASE READ THE
FOLLOWING NOTICE CAREFULLY”**

“As of 01/08/2016, your home loan is 2267 days in default. Under New York State Law, we are required to send you this notice to inform you that you are at risk of losing your home. You can cure this default by making the payment of \$55,817.04 dollars by 04/07/2016.

If you are experiencing financial difficulty, you should know that there are several options available to you that may help you keep your home. Attached to this notice is a list of government approved housing counseling agencies in your area which provide free or very low-cost counseling. You should consider contacting one of these agencies immediately. These agencies specialize in helping homeowners who are facing financial difficulty. Housing counselors can help you assess your financial condition and work with us to explore the possibility of modifying your loan, establishing an easier payment plan for you, or even working out a period of loan forbearance. If you wish, you may also contact us directly at 1-800-931-2424 and ask to discuss possible options.



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While we cannot assure that a mutually agreeable resolution is possible, we encourage you to take immediate steps to try to achieve a resolution. The longer you wait, the fewer options you may have.

If this matter is not resolved within 90 days from the date this notice was mailed, we may commence legal action against you (or sooner if you cease to live in the dwelling as your primary residence.)

If you need further information, please call the New York State Department of Financial Services toll-free helpline at 1-800-269-0990 or visit the Department's website at "<http://www.dfs.ny.gov>"

Sincerely,

Joe Sedeno, Director

Specialty Loan Servicing Department

FCI Lenders Services Inc.

NMLS ID # 4920, CA DRE # 01022780

FORECLOSURE PREVENTION COUNSELORS:

QUEENS County

Agency Name: NEIGHBORHOOD HOUSING SERVICES OF NORTHERN QUEENS

Phone: 718-457-1017

Toll Free:

Fax: 718-457-1247

Email: info@nhsnyc.org

Address: 60-20 Woodside Avenue

WOODSIDE, New York 11377-3541

Counseling Services:

- Financial Management/Budget Counseling
- Home Improvement and Rehabilitation Counseling
- Mortgage Delinquency and Default Resolution Counseling
- Non-Delinquency Post Purchase Workshops
- Pre-purchase Counseling
- Pre-purchase Homebuyer Education Workshops
- Predatory Lending Education Workshops

Languages:

- English

- Spanish

Affiliation: NEIGHBORHOOD HOUSING SERVICES OF NEW YORK CITY (NHS OF NYC)

Website: www.nhsnorthernqueens.org and www.nhsnyc.org

=====

Agency Name: MARGERT COMMUNITY CORPORATION

Phone: 718-471-3724

Toll Free:

Fax: 718-471-5342

Email: jgb@nyct.net

Address: 325 Beach 37th Street

FAR ROCKAWAY, New York 11691-1510

Counseling Services:

- Fair Housing Pre-Purchase Education Workshops
- Financial Management/Budget Counseling
- Home Improvement and Rehabilitation Counseling
- Mortgage Delinquency and Default Resolution Counseling
- Non-Delinquency Post Purchase Workshops
- Pre-purchase Counseling
- Pre-purchase Homebuyer Education Workshops
- Predatory Lending Education Workshops
- Rental Housing Counseling
- Rental Housing Workshops
- Resolving/Preventing Mortgage Delinquency Workshops

Languages:

- English

- Other

- Spanish

Affiliation: NEW YORK STATE HOUSING FINANCE AGENCY

Website: http://www.margert.org

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Agency Name: ROCKAWAY DEVELOPMENT AND REVITALIZATION CORPORATION

Phone: 718-327-5300-227

Toll Free:

Fax: 718-327-4990

Email: Kalexander@rdrc.org

Address: 1920 Mott Ave

Suite 2

FAR ROCKAWAY, New York 11691-4106

Counseling Services:

- Non-Delinquency Post Purchase Workshops
- Pre-purchase Counseling
- Pre-purchase Homebuyer Education Workshops

Languages:

- English

- Spanish

Affiliation:

Website: http://www.rdrc.org

=====

ASIAN AMERICANS FOR EQUALITY

Agency Name:

Phone: 718-961-0888

Toll Free:

Fax: 718-961-0988

Email: Flora@aafecdf.org

Address: 133-04 39th Avenue

FLUSHING, New York 11354-4433

- Counseling Services:
- Fair Housing Pre-Purchase Education Workshops
 - Financial Management/Budget Counseling
 - Home Improvement and Rehabilitation Counseling
 - Mortgage Delinquency and Default Resolution Counseling
 - Non-Delinquency Post Purchase Workshops
 - Pre-purchase Counseling
 - Pre-purchase Homebuyer Education Workshops
 - Predatory Lending Education Workshops
 - Rental Housing Counseling

- Languages:
- Cantonese
 - Chinese Mandarin
 - English

Affiliation: ASIAN AMERICANS FOR EQUALITY

Website: www.aafe.org

=====

Agency Name: ASIAN AMERICANS FOR EQUALITY

Phone: 718-961-0888

Toll Free:

Fax: 718-961-0988

Email: Flora@aafecdf.org

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 - Pre-purchase Counseling
 - Pre-purchase Homebuyer Education Workshops
 - Predatory Lending Education Workshops
 - Rental Housing Counseling

- Languages:
- Cantonese
 - Chinese Mandarin
 - English

Affiliation: ASIAN AMERICANS FOR EQUALITY

Website: www.aafe.org

=====

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL®



7015 0920 0000 0278 0227

7015 0920 0000 0278 0227

U.S. Postal Service™
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Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Postmark
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Sent to Marc Jean Bigoux
Street & Apt. No. 221-02 114th Avenue
or PO Box No. Jamaica Queen NY 11411
City, State, ZIP+4

PS Form 3800, July 2014 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Marc Jean Bigoux
221-02 114th Avenue
Jamaica Queen NY 11411



9590 9403 0551 5173 5623 75

2. Article Number (Transfer from service label)

7015 0920 0000 0278 0227

PS Form 3811, April 2015 PSN 7530-02-000-9-053

COMPLETE THIS SECTION ON DELIVERY

A. Signature <u>X</u>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name)	C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: A No

3. Service Type	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail Restricted Delivery
<input checked="" type="checkbox"/> Certified Mail®	<input checked="" type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail (over \$500)	<input type="checkbox"/> Insured Mail Restricted Delivery

Domestic Return Receipt



New York State Department of Financial Services
One State Street Plaza, New York, NY 10004

Proof of Filing Statement

To Whom It May Concern:

Section 1306 of the Real Property Actions and Proceedings Law (RPAPL) requires lenders, assignees or mortgage loan servicers servicing loans on 1-to-4 family residential properties in New York State to file certain information with the Superintendent of the Department Financial Services within three days after the mailing of a 90-Day Pre-Foreclosure Notice.

The information below pertains to a filing submitted to the Department of Financial Services as required in Section 1306 of RPAPL. The information is presented as filed by the lender, assignee or mortgage loan servicer.

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Anaheim Hills CA 92808

Filing Information:

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Mailing Date Step 1 : 08-JAN-16 12.00.00.000 AM
Mailing Date Step 2 :
Judgment Date Step 3 :
Filing Date Step 1 : 11-JAN-16 02.03.38.000 PM
Filing Date Step 1 Orig : 11-JAN-16 02.03.38.000 PM
Filing Date Step 2 :
Filing Date Step 3 :
Owner Occupd at Jdgmnt :
Property Type : 1 to 4 Family Home
Property Address : 221-02 114th Avenue Cambria Heights
NY 11411
County : Queens
Date of Original Loan : 21-MAY-07 12.00.00.000 AM
Amt of Original Loan : 76450
Loan Number Step 1 :
Loan Number Step 2 :
Loan Reset Frequency :
Loan Type : Junior Lien
Loan Details : Fixed Rate
Loan Term : 20 Year
Loan Modification : No Modification
Days Delinquent : Other
Borrower's Name : June Freeman
Address : 221-02 114th Avenue
Cambria Heights 11411
Borrower's Phone No : 9175319409
Filing Status : Step 1 Completed

Sincerely,

New York State Department of Financial Services



FCI Lender Services, Inc.

Loan Servicing • Specialty Servicing • Default

(714) 282-2424 (800) 931-2424 Fax: (714) 282-5775

June Freeman
221-02 114th Avenue
Cambria Heights, NY 11411

January 8, 2016

RE: Loan Number: [REDACTED]
Subject Property: 221-02 114th Avenue, Cambria Heights, NY 11411

Dear Mr. June Freeman:

**“YOU COULD LOSE YOUR HOME. PLEASE READ THE
FOLLOWING NOTICE CAREFULLY”**

“As of 01/08/2016, your home loan is 2267 days in default. Under New York State Law, we are required to send you this notice to inform you that you are at risk of losing your home. You can cure this default by making the payment of \$55,817.04 dollars by 04/07/2016.

If you are experiencing financial difficulty, you should know that there are several options available to you that may help you keep your home. Attached to this notice is a list of government approved housing counseling agencies in your area which provide free or very low-cost counseling. You should consider contacting one of these agencies immediately. These agencies specialize in helping homeowners who are facing financial difficulty. Housing counselors can help you assess your financial condition and work with us to explore the possibility of modifying your loan, establishing an easier payment plan for you, or even working out a period of loan forbearance. If you wish, you may also contact us directly at 1-800-931-2424 and ask to discuss possible options.



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Joe Sedeno, Director

Specialty Loan Servicing Department

FCI Lenders Services Inc.

NMLS ID # 4920, CA DRE # 01022780

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QUEENS County

Agency Name: NEIGHBORHOOD HOUSING SERVICES OF NORTHERN QUEENS

Phone: 718-457-1017

Toll Free:

Fax: 718-457-1247

Email: info@nhsnyc.org

Address: 60-20 Woodside Avenue

WOODSIDE, New York 11377-3541

Counseling Services:

- Financial Management/Budget Counseling
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- Mortgage Delinquency and Default Resolution Counseling
- Non-Delinquency Post Purchase Workshops
- Pre-purchase Counseling
- Pre-purchase Homebuyer Education Workshops
- Predatory Lending Education Workshops

Languages: - English

- Spanish

Affiliation: NEIGHBORHOOD HOUSING SERVICES OF NEW YORK CITY (NHS OF NYC)

Website: www.nhsnorthernqueens.org and www.nhsnyc.org

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Agency Name: MARGERT COMMUNITY CORPORATION

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Toll Free:

Fax: 718-471-5342

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Affiliation: NEW YORK STATE HOUSING FINANCE AGENCY

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Phone: 718-327-5300-227

Toll Free:

Fax: 718-327-4990

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Suite 2

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- Pre-purchase Homebuyer Education Workshops

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- Spanish

Affiliation:

Website: <http://www.rdrc.org>

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FLUSHING, New York 11354-4433

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- Chinese Mandarin
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Website: www.aafe.org

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- English

Affiliation: ASIAN AMERICANS FOR EQUALITY

Website: www.aafe.org

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U.S. Postal ServiceTM
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OFFICIAL USE

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Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
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PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
 OF THE RETURN ADDRESS, FOLD AT DOTTED LINE



7015 0920 0000 0278 0197
 7015 0920 0000 0278 0197

Sent to
 Street & Apt. No. JUNE FREEMAN
 or PO Box No. 221-02 114th Avenue
 City/State/Zip+4 Cambria Heights NY 11411
 PS Form 3800, July 2014 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

JUNE FREEMAN
221-02 114th Avenue
Cambria Heights NY 11411

9590 9403 0551 5173 5623 99



2. Article Number (Transfer from service label)

7015 0920 0000 0278 0197

PS Form 3811, April 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) _____ C. Date of Delivery _____

D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail (over \$500)	
<input type="checkbox"/> Insured Mail Restricted Delivery	

Domestic Return Receipt